OCT-15-2009	09:27 AM D.E.FRICK TRUCKING 51	8 767 2902	P.02			
BEND COMPLETED  ORM TO:  The Appropriate State or  EPA Regional Office.	RCRA SUBTITLE C SITE IDENTIFICATION FORM					
. Reason for Submittal (See Instructions	Reason for Submittal:  To provide Initial Notification of Regulated Weste Activity (to obtain an EPA ID Number for hazardous					
on page 13.)  MARK ALL BOX(ES)  THAT APPLY	waste, universal waste, or used oil activities)  To provide Subsequent Notification of Regulated Waste Activity (to update site identification information)  As a component of a First RCRA Hazardous Waste Part A Permit Application  As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment #)  As a component of the Hazardous Waste Report					
MALAFFLY						
. Site EPA ID Number (page 14)	EPA ID Number NIY R 110101011 16913	83				
. Site Name (page 14)	Name: DAVID E. FRICK / D.E.	FRICK TRU	icking			
Site Location information	Street Address: 93 BRIDGE ST.	MONTH IN ANY				
(page 14)	City, Town, or Village: SELKIRK		State: NY			
	County Name: ALBANY		ZIp Code: 12158			
Site Land Type (page 14)	Site Land Type: Private County District Federal	☐ Indian ☐ Municip	al State D Other			
North American Industry Classification	A. 14,8,4,2,2,0, B.					
System (NAICS) Code(s) for the (page 14)	om (NAICS) C. (a) for the					
Site Mailing	Street or P. O. Box: 93 BRIDGE ST.					
(page 16)	City, Town, or Village: SELKIRK					
	State: NEW YORK					
	Country: USA	Zip Code: 1214	58			
Site Contact Person	First Name: DAVID MI: E.		ICK			
(page 15)	Phone Number: 518 767 - 2902 Extension:	Email address:	@AOL. COM			
Operator and Legal Owner of the Site (pages 15 and 16)	A. Name of Site's Operator:  DAVID E, FRICK	Date Became Open	atar (ram/dd/yyyy):			
	Operator Type: Private County District Federal Indian Municipal State Other					
	DAVID E, FRICK	Date Became Owns 06 /09	11969			
FDA F 0700 40	Owner Type: Private County District Federal	^	al State Other			
Talled 101						
ax complete perse (4 of app						
Lelt 1	Left ressage with number on Voicemail, How					
17	0	V J				

9. Legal Owner (Continued)	Street or P. O. Box:	93 BRIDGE	ST.		
Address	City, Town, or Village: SELKIRK				
	State: N	EW YORK			
	Country: U:	SA		ZIp Code: 12158	
10. Type of Regulati Mark "Yes" or "I		lete any additional boxes	as instructed.	(See instructions on pages 17 to 20.)	
A. Hazardoue W Complete all	eate Activities parts for 1 through 6.		) ·- · · · · · · · · · · · · · · · · · ·		
	r of Hazardous Waste		N□ 2.	Transporter of Hazardoue Wests	
if "Yes",	choose only one of the fo	llowing - e, b, or c.	-		
a. LQ	G: Greater than 1,000 kg/m	o (2.200 lbs./mo.)	YLI NJEST 3.	Treater, Storer, or Disposer of Hazardous Waste (at your site) Note: A	
	of non-acute hazardous			hazardous waste permit is required for this activity.	
□ b. SQ	G: 100 to 1,000 kg/mo (220	The state of the s			
	of non-acute hazardous	waste; or	YII NIKI 4.	Recycler of Hazardous Waste (at your site)	
C. CE	SQG: Less than 100 kg/mo				
	of non-acute hazardo	els waste	YON SE	Exempt Boller and/or industrial Furnace	
In addition, indicate other generator activities.				If "Yea", mark each that applies.  ☐ a. Small Quantity On-site Burner  Exemption	
Y NE d. Un	ited States Importer of Haza	rdous Waste		D b. Smelting, Melting, and Refining	
YO NEE . MIX	ted Weste (hazardous and r	adioactive) Generator	Y□ N <b>75</b> 8.	Underground injection Control	
B. Universal Was	te Activities		C. Use	ed Oil Activities	
YE NE 1 Lamp Ou	antity Handler of Universe	1 M-4- /	Mar	k all boxes that apply.	
	or more) (refer to your Sta		YD ND4	Used Oil Transporter	
determine	what is regulated). Indic			if "Yes", mark each that applies.	
mark all b	oxes that apply:		F	a. Transporter	
		<u>Manage</u>		b. Transfer Facility	
a. Batterles			Y□ N□ 2.	Used Oil Processor and/or Re-refiner	
b. Pesticide	6		8,1	If "Yes", mark each that applies.	
c. Mercury	containing equipment			a. Processor b. Re-refiner	
d. Lamps				- Container	
e. Other (sp	ecify)		Y□ N□ 3.	Off-Specification Used Oil Burner	
f. Other (sp	ecify)		Y N 14	Used Oil Fuel Merketer	
g. Other (sp	ecity)			f "Yee", mark each that applies.  a. Marketer Who Directs Shipment of	
CINCI 2 Dectination	n Facility for Universal Wa			Off-Specification Used Oil to Off-Specification Used Oil Burner	
	n recility for Universal Wa ardous weste permit may be		_	b. Marketer Who First Claims the	

EPA ID NO: I_			لللا		OMB#: 2050-0028	Expires 06/30/2009
11. Description	of Hazardous Waste	s (See instruction	ns on page 21.)			
handled at y		the order they are			s of the Federal hazar 001, D003, F007, U11:	
					<u> </u>	
hazardous v		ur site. List them in			the waste codes of the egulations. Use an ad	
12. Comments (	See instructions on	page 21.)		k		
THIS APPL	ICATION IS	FOR TR	ANSPORTER	ONLY, A	VO SPECIFIC	SITE,
				2		
	DAVID	E. FRIC	K	***************************************		
	93 BR	IDGE ST.				
	SELKIR	K, M 18	2158			
in accordance with on my inquiry of the information submit penalties for submit	n a system designed the person or persons tted is, to the best of nitting false information ardous Waste Part A	to assure that qual who manage the s my knowledge and n, including the po	ified personnel prop system, or those pers belief, true, accurat ssibility of fine and i	erly gather and eve sons directly response te, and complete. I mprisonment for k	epared under my direct aluate the information onsible for gathering the am aware that there nowing violations. gn (see 40 CFR 270.	submitted. Based ne information, the are significant
Signature of ope	rator, owner, or an sentative	Name and Offi	icial Title (type or p	orint)		Date Signed (mm/dd/yyyy)
David	6. Frick	DAVII	E. FRIC	K, OWNE	R	10-09-09
EPA Form 8700	-12 (Revised 7/200	6)				Page 3 of 3

SEND COMPLETED FORM TO: The Appropriate State or	United States Environmental P	STATE OF THE OF			
EPA Regional Office.	RCRA SUBTITLE C SITE IDENTIFICATION FORM				
1. Reason for Submittal (See instructions on page 13.)  MARK ALL BOX(ES) THAT APPLY	Reason for Submittal:  To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities)  To provide Subsequent Notification of Regulated Waste Activity (to update site identification information)  As a component of a First RCRA Hazardous Waste Part A Permit Application  As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment #)  As a component of the Hazardous Waste Report				
2. Site EPA ID Number (page 14)	EPA ID Number				
3. Site Name (page 14)	Name:				
4. Site Location	Street Address:				
Information (page 14)	City, Town, or Village:	·····		State:	
	County Name:			Zip Code:	
5. Site Land Type (page 14)	Site Land Type: ☐ Private ☐ County ☐ District	☐ Federa	al ☐ Indian ☐ Municipa	al State C Other	
6. North American Industry Classification	A. 14.8.4.2.2.0.1 B.			J	
System (NAICS) Code(s) for the Site (page 14)	C.   D.			J	
7. Site Mailing Address	Street or P. O. Box:	- <b>L</b>			
(page 15)	City, Town, or Village:				
	State:				
	Country:	Country: Zip Code:		Salara Salar	
8. Site Contact	First Name:	MI:	Last Name:		
Person (page 15)	Phone Number: Extension:		Email address:	The state of the s	
9. Operator and Legal Owner	A. Name of Site's Operator:		Date Became Operator (mm/dd/yyyy):		
of the Site (pages 15 and 16)	Operator Type: ☐ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other				
(J. 25 . 5 4 ld 10)	B. Name of Site's Legal Owner: Date Became Owner (mm/		ər (mm/dd/yyyy):		
	Owner Type: ☐ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other				
Couled 10/14/11	l sections The applice	der	mi freek.	lucked fr	

9. Legal Owner	Street or P. O. Box:	
(Continued) Address	City, Town, or Village:	
	State:	
	Country:	Zip Code:
	ted Waste Activity "No" for all activities; complete any additional boxes	s as instructed. (See instructions on pages 17 to 20.)
The second secon	Waste Activities I parts for 1 through 6.	
	tor of Hazardous Waste	
	or or nazardous waste ', choose only one of the following - a, b, or c.	N□ 2. Transporter of Hazardous Waste
	, and and and and and	Y□ N⊠ 3. Treater, Storer, or Disposer of
☐ a. L	QG: Greater than 1,000 kg/mo (2,200 lbs./mo.) of non-acute hazardous waste; or	Hazardous Waste (at your site) Note: A hazardous waste permit is required for this
□ b. S	QG: 100 to 1,000 kg/mo (220 - 2,200 lbs./mo.)	activity.
	of non-acute hazardous waste; or	Y N 4. Recycler of Hazardous Waste (at your site)
□ c. C	ESQG: Less than 100 kg/mo (220 lbs./mo.)	
L J. 154*	of non-acute hazardous waste	Y N 5. Exempt Boiler and/or Industrial Furnace If "Yes", mark each that applies.
In addition, indicate other generator activities.  Y  N  d. United States Importer of Hazardous Waste		a. Small Quantity On-site Burner Exemption
. <u> </u>	mico otates importer of Flazardous Waste	□ b. Smelting, Melting, and Refining
Y□ N⊠ e. M	lixed Waste (hazardous and radioactive) Generator	Y□ № 6. Underground Injection Control
B. Universal W	aste Activities	C. Used Oil Activities
Y□ N□ 1. Large Q	uantity Handler of Universal Waste (accumulate	Mark all boxes that apply.
5,000 kg	or more) [refer to your State regulations to	Y□ N□ 1. Used Oil Transporter
	ne what is regulated]. Indicate types of universal	If "Yes", mark each that applies.
mark an	boxes that apply:  Manage	□ a. Transporter □ b. Transfer Facility
		b. Hansler actility
a. Batterie	es 🔲	Y□ N□ 2. Used Oil Processor and/or Re-refiner
b. Pesticio	des	If "Yes", mark each that applies.   □ a. Processor
c. Mercur	y containing equipment	b. Re-refiner
d. Lamps		,
e. Other (	specify)	Y□ N□ 3. Off-Specification Used Oil Burner
f. Other (	specify)	Y□ N□ 4. Used Oil Fuel Marketer
g. Other (	specify)	If "Yes", mark each that applies.
	-	a. Marketer Who Directs Shipment of
∕□N□2 Postinot	ion Facility for Universal Waste	Off-Specification Used Oil to Off-Specification Used Oil Burner
	zardous waste permit may be required for this activity.	□ b. Marketer Who First Claims the
		Used Oil Meets the Specifications

11. Deecrip	tion of Hazardous W	estes (See Instructi	one on page 21.)			
nanoie	Codes for Federally ed at your site. List the onal page if more space	em in the order they a	ous Wastes. Please are presented in the	list the waste code regulations (e.g., Do	s of the Federal haza 001, D003, F007, U11	rdous wastes  2). Use an
1						
3.00 P. A. S.	paces are needed for w	THE COURT	· ·			
· •						
2. Commen	nts (See Instructions	on page 21.)				
	APPLICATION		PANSPORTE	R ONLY, N	O SPECIFIC	SITE.
	DAVID E	IS FOR TH	PANSPORTE	R ONLY, N	O SPECIFIC	SITE.
	PPLICATION	IS FOR TH	PORTE	R ONLY, N	O SPECIFIC	SITE.

13. Certification. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

For the RCRA Hazardous Waste Part A Permit Application, all operator(s) and owner(s) must sign (see 40 CFR 270.10 (b) and 270.11).

Signature of operator, owner, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)
David E. Spick	DAVID E. FRICK OWNER	10-09-09
EPA Form 8700-12 (Revised 7/2006)		

Page 3 of 3



## ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

11/02/2009

Region 2

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER:

NYR000169383

INSTALLATION NAME:

**DE FRICK TRUCKING** 

**INSTALLATION ADDRESS:** 

93 BRIDGE ST SELKIRK, NY 12158

MAILING ADDRESS:

93 BRIDGE ST SELKIRK, NY 12158

EPA Form 8700-12AB (4-80)

**USEPA - REGION 2 RCRA Programs Branch** 290 Broadway, 22nd Floor New York, NY 10007-1866

ATTN: RCRA NOTIFICATIONS

Tel: (212) 637-4106 Fax: (212) 637-4437

TO: DEFRICK TRUCKING

or Current Occupant

ATTN: DAVID FRICK

93 BRIDGE ST

**SELKIRK, NY, 12158**